

Best Available Copy

**CLAIMS ONLY**

SERIAL NO.  FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
104						
212	1					
3						
4						
5						
6						
7						
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9						
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11						
12						
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22						
23						
24						
25						
26	1					
27	1					
28						
29						
30						
31						
32						
33						
34						
35						
36						
37	1					
38	1					
39						
40						
41	1					
42	1					
43						
44						
45						
46						
47						
48						
49						
50	1					
TOTAL IND.	1					
TOTAL DEP.	43					
TOTAL CLAIMS	50					

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
55						
56	1					
57	1					
58	1					
59						
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97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS